



EMPLOYMENT APPLICATION
 Town of Matthews
 Human Resources Department
 232 Matthews Station Street, Matthews, NC 28105-6713
 Office (704) 847-4411; Fax (704) 845-1977
 www.matthewsnc.gov/departments/HumanResources
 E-mail Address: hrdepartment@matthewsnc.com

Position Title
Position Number

FIRE & EMS VOLUNTEER ONLY Indicate Position:	FF	EMT	FF/EMT	Fire Corps
---	----	-----	--------	------------

It is the policy of the Town to foster, maintain and promote equal employment opportunity. The Town shall select employees on the basis of the applicant's qualifications for the job and award them, with respect to compensation and opportunity for training and advancement, including upgrading and promotion, without regard to age, sex, race, color, religion, national origin, disability, political affiliation, military or veteran status, or marital status. Applicants with physical disabilities shall be given equal consideration with other applicants for positions in which their disabilities do not represent an unreasonable barrier to satisfactory performance of duties. (Town of Matthews Personnel Policy, Article III, Section I).

PRINT OR TYPE ALL INFORMATION

Last Name	First Name	Initial	Phone (Cell)	Phone (Other)	E-mail Address
Mailing Address			City	State	Zip
Driver's License Information					
If you are applying for a position that requires a driver's license you must provide the information below:					
License #	State Issued	Class or Type			Expiration Date (mm/dd/yy)

Immigration Reform & Control Act— After employment, you will be required to submit verification of your legal right to work in the United States. The Town of Matthews employs only United States citizens or aliens who can provide proof of identity and work authorization within 3 working days of employment.

JOB RELATED EDUCATION AND TRAINING

Institution Information	Dates Attended (mm/yy) to (mm/yy)	Type of Degree, Diploma Received or Number of Credit Hours	Major/Minor or Field of Study
Name of High School (Includes GED equivalency)			
Address			
Name of College or University			
Address			
Name of Additional College or University			
Address			
Technical or Vocational Training			
Address			

Describe job-related skills, knowledge, special training, or licenses you have pertaining to the position. Please identify skills using computer software such as Word, Excel, PowerPoint, Access, or other specialized computer software:

--

List special professional and vocational qualifications, i.e., certifications, licenses, publications, public speaking, membership in professional or scientific societies, and volunteer experience:

--

Describe awards, honors and fellowships received:

--

<p>Are you now or have you ever been employed by the Town of Matthews? If "yes", identify most recent employment dates, job title, department assigned and reason for leaving.</p>	<p>__Yes</p>	<p>__No</p>

<p>Do you have any relatives currently employed by the Town of Matthews? If "yes", list name(s), position title, department assigned, and their relationship to you.</p>	<p>__Yes</p>	<p>__No</p>

<p>Were you ever discharged or forced to resign from employment? If "yes", explain. Discharges or forced resignations will not necessarily disqualify you from employment.</p>	<p>__Yes</p>	<p>__No</p>

<p>This question is for Males 18 through 25 only—Federal law requires males age 18-25 to register with the Federal government to comply with the Military Selective Service Act. North Carolina GS 143B-421.1 prohibits local governments from employing any males who have not complied with the Federal Selective Service Registration regulations. If this requirement pertains to you, have you complied with the Federal law?</p>	<p>__Yes</p>	<p>__No</p>

WORK HISTORY

Beginning with your current or most recent position, list all time periods of **employment, unemployment, or volunteer experience** over the past 10 years showing changes in title or promotions separately. Attach additional sheets or resume if needed; however, a resume will not substitute for the information required in this section.

From (mm/yy)	To (mm/yy)	Name of Employer	Current or Last Position Title	Supervisor's Name	
Phone		Address		City	State
Employment Status		Duties			May We Contact Supervisor?
<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		<input type="checkbox"/> Volunteer <input type="checkbox"/> Other			
Number Employees Supervised		Reason for Leaving?			Current Salary
From (mm/yy)	To (mm/yy)	Name of Employer	Current or Last Position Title	Supervisor's Name	
Phone		Address		City	State
Employment Status		Duties			May We Contact Supervisor?
<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		<input type="checkbox"/> Volunteer <input type="checkbox"/> Other			
Number Employees Supervised		Reason for Leaving?			Final Salary
From (mm/yy)	To (mm/yy)	Name of Employer	Current or Last Position Title	Supervisor's Name	
Phone		Address		City	State
Employment Status		Duties			May We Contact Supervisor?
<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		<input type="checkbox"/> Volunteer <input type="checkbox"/> Other			
Number Employees Supervised		Reason for Leaving?			Final Salary
From (mm/yy)	To (mm/yy)	Name of Employer	Current or Last Position Title	Supervisor's Name	
Phone		Address		City	State
Employment Status		Duties			May We Contact Supervisor?
<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		<input type="checkbox"/> Volunteer <input type="checkbox"/> Other			
Number Employees Supervised		Reason for Leaving?			Final Salary

ADDITIONAL INFORMATION

List three persons who are not related to you and who have definite knowledge of your qualifications and fitness for the position for which you are applying. Do not repeat names of supervisors listed in WORK HISTORY.

Name	Present Business or Home Address, Email and Phone Number	How Long Have You Known This Person?
	Address:	
	Email:	
	Phone Number:	
	Address:	
	Email:	
	Phone Number:	
	Address:	
	Email:	
	Phone Number:	

PHYSICAL EXAM AND CONTROLLED SUBSTANCE TESTING - A routine pre-employment physical exam may be required depending on position following offer of employment . Any medical problems identified during the physical exam that are directly related to the ability to perform assigned duties may result in withdrawal of job offer or termination if already employed.

Controlled substance testing is required prior to finalization of the selection process for employment. Further information will be provided at the appropriate time in the selection process. A confirmed positive drug test will result in disqualification for employment and may be grounds for dismissal if already employed.

In accordance with Americans with Disabilities Act, the Town of Matthews will consider reasonable accommodation if requested.

APPLICANT CERTIFICATION AND AUTHORIZATION

I certify that all statements made in this application are true, complete and correct to the best of my knowledge and belief, and that any false statements or relevant omissions shall be considered sufficient cause for employment disqualification or dismissal. By my signature below, I acknowledge that any or all information provided by me is subject to verification. I also authorize the Town to contact schools or other educational institutions that I may have attended, and obtain any information about my qualifications for employment. I further authorize my current and/or former employers and educational institutions to release any information requested by the Town of Matthews unless so noted in the Work History Section of this application.

Applicant Signature

Signature Date

You must complete all parts of the employment application in order for your application to be considered complete. This application can be populated online, but **must be printed, signed and submitted to the Town of Matthews HR department.**

Thank you for your interest in the Town of Matthews.

Town of Matthews Equal Opportunity Employer Questionnaire
PLEASE COMPLETE THIS FORM - IT WILL BE REMOVED PRIOR TO PROCESSING

In order to comply with United States Government Equal Employment Opportunity requirements, all applicants for employment are requested to complete this form. Data collected will be used for statistical reporting purposes and to measure the effectiveness of recruitment efforts and selection procedures. This information is requested on a voluntary basis, will be kept confidential, and is not available to hiring authorities. Refusing to provide the information will not result in any adverse treatment with respect to the employment or selection process.

The Town of Matthews is an equal opportunity employer. In accordance with applicable laws and regulations, the Town does not discriminate on the basis of disability or other prohibited criteria. If you believe you have been treated unfairly or discriminated against on the basis of race, color, national origin, gender, age, religion, political affiliation, sexual orientation, or disability, please contact the Human Resources Department at (704) 847-4411.

DISABLED APPLICANTS: The Human Resources Department may have resources to assist applicants with the application and/or interview process. If special needs are to be considered, please call (704) 847-4411.

Applying for Position #		Date	Month	Day	Year	
Job Title						
Applicant's Name						
Are you age 40 or over?	Yes	No	Are you		Male	Female
Are you a veteran of the United States Armed Forces?			Yes	No		
Branch of Service and Rank				Type of Discharge		

Ethnic Origin Check one)

White (not of Hispanic origin): All persons with origins in any of the peoples of Europe, North Africa or the Middle East

Black (not of Hispanic origin): All persons with origins in any of the black racial groups of Africa.

Hispanic: All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.

Asian or Pacific Islander: All persons with origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This area includes for example, China, India, Japan, Korea and Samoa

American Indian or Alaskan Native: All persons with origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.

To help us ensure our recruitment efforts are targeted to and reaching all segments of our recruitment area and community, please identify how you first learned of this job opening (check only one box).

<input type="checkbox"/>	A Friend or Relative	<input type="checkbox"/>	Town Bulletin Board
<input type="checkbox"/>	A Town Employee	<input type="checkbox"/>	Newspaper. Name:
<input type="checkbox"/>	Internet Web site:	<input type="checkbox"/>	Other Means. Describe :
If you are disabled and would like to request testing accommodations, please describe:			

Thank you for making an application for this position and in your decision to select the Town of Matthews as a possible employer. If you need clarification of information on this form, please contact our Human Resources Department at 704-847-4411.